

# Pre-Registration & Ticket Fee Form

**Early Bird Registration Deadline** > August 27, 2007

**Pre-registration Deadline** > September 12, 2007

## HOW TO REGISTER

**On-Line** > at [www.calbar.ca.gov/annualmeeting](http://www.calbar.ca.gov/annualmeeting)

**FAX** > Fax Pre-registration form/Course Selector to: (415) 538-2368.  
Do not mail original form. Faxed registration must include credit card payment and cannot be confirmed by telephone. Please keep a copy for your records.

**MAIL** > Mail Pre-registration form/Course Selector to:  
2007 Annual Meeting Registration  
The State Bar of California  
180 Howard Street  
San Francisco, California 94105-1639

*Additional copies of the form and course selector are also available for download from [www.calbar.ca.gov/calbar/annualmeeting](http://www.calbar.ca.gov/calbar/annualmeeting).*

*Pre-registration is required for ticketed events and hotel reservations. Use reverse side for course selection. For hotel reservations see **Travel & Hotel Information** on page 20.*

BAR NUMBER \_\_\_\_\_

FIRST NAME \_\_\_\_\_

LAST NAME \_\_\_\_\_

BADGE NAME \_\_\_\_\_

(Please print or type name as it should appear on name badge.)

PHONE \_\_\_\_\_

FAX \_\_\_\_\_

E-MAIL \_\_\_\_\_

(Required for e-mail confirmation.)

FIRM NAME \_\_\_\_\_

FIRM ADDRESS \_\_\_\_\_

CITY, STATE, & ZIP \_\_\_\_\_

\*NON-ATTORNEY SPOUSE/GUEST NAME \_\_\_\_\_

*\*If your spouse/guest is not an attorney, registration is complimentary.  
Attorney spouse/guest must complete separate form and pay registration fee.*

☐ Check here if you don't want your name and address disclosed to other 2007 Annual Meeting attendees and exhibitors/vendors.

For registration information please call (415) 538-2508

 For special assistance please call (415) 538-2210

For speech and hearing impaired dial 711.

## REGISTRATION FEES

(Select only one of the following)

	Through August 27	Aug. 27 - Sept. 12 and on-site
<input type="checkbox"/> Attorneys licensed before 9/1/06	\$350	\$450
<input type="checkbox"/> Attorneys licensed after 9/1/06	\$250	\$350
<input type="checkbox"/> Delegates/Alternates (includes Executive, Calendar Coordinating, and Resolutions Committees)	\$350	\$450
<input type="checkbox"/> Other (Non-attorney bar association staff/paralegal/legal secretary/office administrator/librarian)	\$250	\$350

**Subtotal for Registration Fee:** \$ \_\_\_\_\_

## EVENT FEES

*Event fees will not be accepted without pre-registration fee.*

### Thursday, September 27

#Tickets

[1] State Bar Luncheon with James Bradley	_____ \$38	\$ _____
[2] Opening Night Reception	_____ (# in party)	\$FREE
[3] California Women Lawyers Dinner with Eleanor Clift	_____ \$100	\$ _____

### Friday, September 28

[4] State Bar Breakfast with Charles Charmas	_____ \$28	\$ _____
[5] State Bar Luncheon & Morrison Address	_____ \$38	\$ _____
[6] Presidents Reception at Disney's CA Adventure	_____ \$65	\$ _____
[7] Presidents Reception shuttle	_____ (# in party)	\$FREE

### Saturday, September 29

[8] Bench Bar Luncheon with Jane Goodall	_____ \$38	\$ _____
[9] State Bar Annual Meeting "Supper Club" (includes a reservation for the Nightclub)	_____ \$75	\$ _____
[10] Annual Meeting Nightclub (do not check box if attending item 9 above)	_____ (# in party)	\$FREE

### Sunday, September 30

[11] 5K Fun Run/2K Power Walk \_\_\_\_\_ \$30 \$ \_\_\_\_\_  
**Disneyland Resort & Disney's California Adventure® Park  
Discount Ticket**

[218] Adult Ticket, Single Park (Disneyland or Cal Advent.)	_____ \$52	\$ _____
[219] Child Ticket (age 3-9 yrs), Single Park	_____ \$42	\$ _____
[220] Adult Ticket, Two-Park, One Day	_____ \$72	\$ _____
[221] Child Ticket, Two-Park, One Day	_____ \$62	\$ _____

**Total Amount Enclosed or to be Charged:** \_\_\_\_\_

## PAYMENT

Paying by check? Make check payable to: The State Bar of California.  
Paying by credit card? Fax registration form to: (415) 538-2368.

I authorize the State Bar of California to charge my Annual Meeting fees to my **MasterCard** or **VISA** account. (No other credit cards will be accepted.) ☐ MasterCard ☐ VISA

ACCOUNT # (VISA/Mastercard only) \_\_\_\_\_

EXPIRATION DATE: \_\_\_\_\_

CARDHOLDER'S NAME: (Please print as it appears on card) \_\_\_\_\_

CARDHOLDER'S SIGNATURE \_\_\_\_\_

# 2007 Course Selector

Name \_\_\_\_\_ Bar # \_\_\_\_\_

Circle the number of the program you wish to attend. Select only ONE in each time slot. Please be aware some program time slots overlap. Select carefully. If you select programs that overlap, we will choose based on availability. Please select an alternative program in the event that a program sells out. Programs highlighted in orange are CBBC sessions.

THURSDAY   SEPT. 27		PROGRAM NUMBER	ALTERNATIVE PROGRAMS
8:00 am-5:00 pm		12	
10:00 am-12:00 noon		13 14 15 16 17 18 19 20 21 22 23 24 25	13 14 15 16 17 18 19 20 21 22 23 24 25
2:15 pm-4:15 pm		26 27 28 29 30 31 32 33 34 35 36 37 38 39	26 27 28 29 30 31 32 33 34 35 36 37 38 39
4:45 pm-5:45 pm		40 41 42 43 44 45 46 47 48 49 50 51 52 53 54	40 41 42 43 44 45 46 47 48 49 50 51 52 53 54
FRIDAY   SEPT. 28		PROGRAM NUMBER	ALTERNATIVE PROGRAMS
8:30 am-9:30 am		55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71	55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71
8:30 am-12:00 noon		72	72
10:00 am-12:00 noon		73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94	73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94
2:15 pm-4:15 pm		95 96 97 98 99 100 101 102 103 104 105 106 107 108 109 110 111 112 113 222	95 96 97 98 99 100 101 102 103 104 105 106 107 108 109 110 111 112 113 222
2:15 pm-5:45 pm		114 115 116	114 115 116
4:45 pm-5:45 pm		117 118 119 120 121 122 123 124 125 126 127 128 129 130 131	117 118 119 120 121 122 123 124 125 126 127 128 129 130 131
SATURDAY   SEPT. 29		PROGRAM NUMBER	ALTERNATIVE PROGRAMS
8:30 am-10:30 am		132 133 134 135 136 137 138 139 140 141 142 143 144 145 146 147 148 149 150 151 152	132 133 134 135 136 137 138 139 140 141 142 143 144 145 146 147 148 149 150 151 152
10:30 am-12:00 noon		Free Time to Visit the Exhibit Hall	Free Time to Visit the Exhibit Hall
2:15 pm-4:15 pm		153 154 155 156 157 158 159 160 161 162 163 164 165 166 167 168 169 170 171 172 173 174 175	153 154 155 156 157 158 159 160 161 162 163 164 165 166 167 168 169 170 171 172 173 174 175
2:15 pm-5:45 pm		176	176
4:45 pm-5:45 pm		177 178 179 180 181 182 183 184 185 186 187 188 189 190	177 178 179 180 181 182 183 184 185 186 187 188 189 190
SUNDAY   SEPT. 30		PROGRAM NUMBER	ALTERNATIVE PROGRAMS
8:30 am-9:30 am		191 192 193 194 195 196 197 198 199 200 201 202 203 204	191 192 193 194 195 196 197 198 199 200 201 202 203 204
8:30 am-12:00 noon		205 206	205 206
10:00 am-12:00 noon		207 208 209 210 211 212 213 214 215 216 217	207 208 209 210 211 212 213 214 215 216 217